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<b>State:</b>	Arkansas	<b>Filing Company:</b>	Knights of Columbus
<b>TOI/Sub-TOI:</b>	L08 Life - Other/L08.000 Life - Other		
<b>Product Name:</b>	Reserve Interest Rate Change		
<b>Project Name/Number:</b>	KOFC/161/161		

## Filing at a Glance

Company:	Knights of Columbus
Product Name:	Reserve Interest Rate Change
State:	Arkansas
TOI:	L08 Life - Other
Sub-TOI:	L08.000 Life - Other
Filing Type:	Form
Date Submitted:	12/07/2012
SERFF Tr Num:	FRCS-128800173
SERFF Status:	Closed-Approved-Closed
State Tr Num:	
State Status:	Approved-Closed
Co Tr Num:	5877
Implementation	On Approval
Date Requested:	
Author(s):	Michael Cochran, Kevin Wiggs
Reviewer(s):	Linda Bird (primary)
Disposition Date:	12/12/2012
Disposition Status:	Approved-Closed
Implementation Date:	

State Filing Description:

**State:** Arkansas  
**TOI/Sub-TOI:** L08 Life - Other/L08.000 Life - Other  
**Product Name:** Reserve Interest Rate Change  
**Project Name/Number:** KOFC/161/161

**Filing Company:** Knights of Columbus

## General Information

Project Name: KOFC/161	Status of Filing in Domicile: Pending
Project Number: 161	Date Approved in Domicile:
Requested Filing Mode: Review & Approval	Domicile Status Comments: Submitted on or about this same date.
Explanation for Combination/Other:	Market Type: Individual
Submission Type: New Submission	Individual Market Type:
Overall Rate Impact:	Filing Status Changed: 12/12/2012
	State Status Changed: 12/12/2012
Deemer Date:	Created By: Michael Cochran
Submitted By: Kevin Wiggs	Corresponding Filing Tracking Number:
Filing Description:	
Expedited Review Requested	
2013 Statutory Valuation Interest Rate Change	

We have been retained by Knights of Columbus to file the enclosed form for approval in your state.

Our fee of \$50 has been sent by EFT on this same date.

The rider is submitted because of a change to the Statutory Valuation Interest Rate to comply with the reduction in the statutory valuation interest rates for 2013 life insurance issues and for future changes.

The Rider provides a level death benefit for 10 or 20 years, expiring at the end of the term for no value. Premiums are guaranteed level for the term period.

This form is new, and it is intended to replace Level Term Insurance Rider, form 81L 6-09, approved by your Department on 05/05/2009, SERFF Tracking Number: FRCS-126121409, State File Number: 42188. Since the rider provides term insurance that does not produce cash values, a Reserve provision is not required in the rider. The only changes which have been made to the form are the deletion of the Reserves provision and the form number. A marked copy of the previous form has been included for information.

The Knights of Columbus is a fraternal society.

This rider will be used with the following policies on the attached chart. It may also be used with other policies approved by your Department in the future.

### Previously Approved Contracts

Form Number/ Description/ Approval Date/ SERFF/State ID #
801-AR 1-08/ Life Paid-Up at Age 100 Contract/ 08/13/2007/ FRCS-125239097/36485
822-AR 1-08/ Life Paid-Up at Age 65 Contract/ 03/03/2008/ FRCS-125376462/37962
829-AR 1-08/ 20-Year Payment Life Contract/ 02/13/2008/ FRCS-125376643/37961
807-AR 1-08/ Life Paid-Up at Age 100 with Additional Protection Benefit/ 06/04/2008/ FRCS-125641488/39163
809-AR 3-11/ 10 Pay Life Contract/ 12/09/2010/ FRCS-126875777/47232
808-AR 12-11/ Graded Premium Life Contract/ 05/05/2011/ FRCS-127088418/48665

State: Arkansas

Filing Company: Knights of Columbus

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To the best of our knowledge, this filing is complete and intended to comply with the insurance laws of your jurisdiction.

If you have any questions or need additional information, please call toll-free 1-800-927-2730. Thank you for your assistance.

## Company and Contact

### Filing Contact Information

Michael Cochran, Compliance Specialist    michael.cochran@firstconsulting.com  
1020 Central    800-927-2730 [Phone] 2756 [Ext]  
Suite 201    816-391-2755 [FAX]  
Kansas City, MO 64105

### Filing Company Information

(This filing was made by a third party - FC01)

Knights of Columbus	CoCode: 58033	State of Domicile: Connecticut
1 Columbus Plaza	Group Code:	Company Type:
New Haven, CT 06507-3326	Group Name:	State ID Number:
(203) 752-4266 ext. [Phone]	FEIN Number: 06-0416470	

## Filing Fees

Fee Required?	Yes
Fee Amount:	\$50.00
Retaliatory?	No
Fee Explanation:	\$50 per form x \$50 = \$50
Per Company:	No

Company	Amount	Date Processed	Transaction #
Knights of Columbus	\$50.00	12/07/2012	65544376

<b>SERFF Tracking #:</b>	FRCS-128800173	<b>State Tracking #:</b>		<b>Company Tracking #:</b>	5877
<b>State:</b>	Arkansas	<b>Filing Company:</b>	Knights of Columbus		
<b>TOI/Sub-TOI:</b>	L08 Life - Other/L08.000 Life - Other				
<b>Product Name:</b>	Reserve Interest Rate Change				
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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	12/12/2012	12/12/2012

<b>SERFF Tracking #:</b>	FRCS-128800173	<b>State Tracking #:</b>		<b>Company Tracking #:</b>	5877
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## Disposition

Disposition Date: 12/12/2012

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		No
Supporting Document	Marked Changes		Yes
Supporting Document	Third Party Authorization		Yes
Supporting Document	Statement of Variability		Yes
Supporting Document	Actuarial Memorandum		No
Supporting Document	Certificate of Compliance		Yes
Form	Level Term Insurance Rider		Yes

<b>State:</b>	Arkansas	<b>Filing Company:</b>	Knights of Columbus
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## Form Schedule

Lead Form Number: 81L 1-13									
Item No.	Schedule Item Status	Form Name	Form Number	Form Type	Form Action	Action Specific Data		Readability Score	Attachments
1		Level Term Insurance Rider	81L 1-13	POLA	Revised	Previous Filing Number:	FRCS-126121409	56.500	81L 1-13.pdf
						Replaced Form Number:	81L 6-09		

### Form Type Legend:

<b>ADV</b>	Advertising	<b>AEF</b>	Application/Enrollment Form
<b>CER</b>	Certificate	<b>CERA</b>	Certificate Amendment, Insert Page, Endorsement or Rider
<b>DDP</b>	Data/Declaration Pages	<b>FND</b>	Funding Agreement (Annuity, Individual and Group)
<b>MTX</b>	Matrix	<b>NOC</b>	Notice of Coverage
<b>OTH</b>	Other	<b>OUT</b>	Outline of Coverage
<b>PJK</b>	Policy Jacket	<b>POL</b>	Policy/Contract/Fraternal Certificate
<b>POLA</b>	Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	<b>SCH</b>	Schedule Pages

## KNIGHTS OF COLUMBUS LEVEL TERM INSURANCE RIDER

This rider is made part of the Contract to which it is attached. It is subject to the Contract's provisions. The definitions on Page 2 of the Contract also apply to this rider.

**RIDER INSURED:** The Rider Insured is the Insured unless a different person is named below:

**ISSUE DATE:** This rider becomes effective as of its Issue Date which is the Issue Date of the Contract unless a later date is shown below:

Issue Date:  Expiry Date:  Rider Amount:

### EXPIRY DATE

Unless the Expiry Date is shown above, the Expiry Date for this rider is the Annual Contract Date on the [tenth] anniversary of the Register Date shown on Page 3 of the Contract.

### PREMIUM

The extra premium for this rider is shown on Page 3 of the Contract. It is due at the same time and on the same terms as other premium under the Contract. The premium for this rider will cease at the Expiry Date. Premium for this rider will be waived if premium payments for the Contract are waived under a disability rider. Payment of the premium for this rider will not increase the cash value, if any, of the Contract.

### INSURANCE BENEFIT

We agree to pay the Rider Amount upon receipt at the Home Office of due proof of the Rider Insured's death prior to the Expiry Date while this rider and the Contract are in force. Payment of the Rider Amount will be in addition to the other benefits due under the Contract. This Rider Amount is that amount listed on Page 3 of the Contract unless the Rider Amount is shown above.

### CONVERSION

If it is in force, this rider can be converted to a new contract at any time before the Expiry Date and before the Annual Contract Date nearest the Rider Insured's 65<sup>th</sup> birthday or the first Annual Contract Date, if later. If a disability rider is attached to the Contract, conversion must occur before the Insured becomes wholly disabled. This rider can be converted without evidence of insurability for an amount not more than the Rider Amount. The new contract can be any of our plans (other than term) available for issue on the new contract's Register Date. The premium for the new contract will be based on the Rider Insured's birthday nearest the new contract's Register Date, and the new contract will be in the same premium class as this rider.

Conversion must be requested in writing. The conversion date, which is the Register Date of the new contract, will be a date mutually agreed upon.

A disability rider will apply to the new contract only if: (a) such a rider is attached to the Contract on the conversion date; and (b) we issue such riders at the Rider Insured's attained age at the conversion date. If the Rider Insured and the Insured are not the same, evidence of insurability will be required.

### DISABILITY CONVERSION BENEFIT

This rider will be converted automatically at the earlier of the Expiry Date and the Annual Contract Date nearest the Rider Insured's 65<sup>th</sup> birthday, provided that on the earliest of these dates a valid claim for waiver of premium benefits has been presented. Conversion will be to a Life Paid-Up at Age 100 contract. The Register Date of the new contract will be the earlier of the two dates mentioned above. The amount of the new contract will be the Rider Amount hereof. The new contract will be in the same premium class as this rider, and the premium rate will be that applicable to the Rider Insured's age on the birthday nearest the Register Date of the new contract. The new contract will include a disability rider, and disability benefits will commence immediately.

### SUICIDE EXCLUSION

If the Rider Insured dies within two years after the Issue Date of this rider due to suicide, this rider will terminate and we will pay the beneficiary the premium paid hereon.

### INCONTESTABILITY

We will not contest this rider after it has been in force during the Rider Insured's lifetime for two years from its Issue Date, except for nonpayment of premium.

### OPTIONS AVAILABLE UPON THE INSURED'S DEATH

If the Insured and the Rider Insured are not the same, and the Insured dies prior to the Expiry Date while this rider is in force, the Rider Insured shall be permitted to exercise the rights set forth in the Conversion provision, provided that conversion is requested within 60 days of the Insured's death. The Register Date of the new contract will be the first day of the month after the date of death.

### TERMINATION

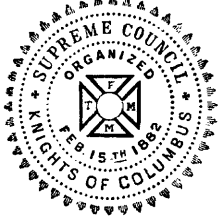
This rider terminates:

- (a) On its Expiry Date;
- (b) At the end of the Grace Period for a premium not paid for the Contract or this rider;
- (c) When a nonforfeiture option under the Contract takes effect;
- (d) When the Contract terminates for any reason; or
- (e) When we receive the owner's written request canceling this rider.

No premium for this rider will be due after the date of termination. Any advance premium payment not then due will be returned.

Issued at [New Haven, Connecticut].

KNIGHTS OF COLUMBUS



Attest:

By:

[ *Charles E. Maurer Jr.* ]

Supreme Secretary

[ *Carl A. Anderson* ]

Supreme Knight



<b>State:</b>	Arkansas	<b>Filing Company:</b>	Knights of Columbus
<b>TOI/Sub-TOI:</b>	L08 Life - Other/L08.000 Life - Other		
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## Supporting Document Schedules

		Item Status:	Status Date:
Satisfied - Item:	Flesch Certification		
Comments:			
Attachment(s):			
AR RDB.pdf			

		Item Status:	Status Date:
Satisfied - Item:	Marked Changes		
Comments:			
Attachment(s):			
81L 6-09 Changes.pdf			

		Item Status:	Status Date:
Satisfied - Item:	Third Party Authorization		
Comments:			
Attachment(s):			
Auth.pdf			

		Item Status:	Status Date:
Satisfied - Item:	Statement of Variability		
Comments:			
Attachment(s):			
SOV 81L 1-13.pdf			

		Item Status:	Status Date:
Satisfied - Item:	Certificate of Compliance		
Comments:			
Attachment(s):			

<b>SERFF Tracking #:</b>	FRCS-128800173	<b>State Tracking #:</b>		<b>Company Tracking #:</b>	5877
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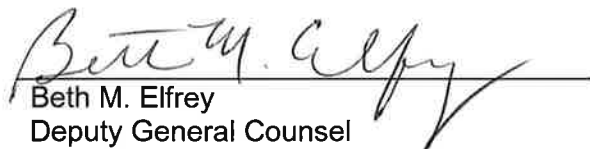
AR COC.pdf

**STATE OF ARKANSAS  
READABILITY CERTIFICATION**

**COMPANY NAME:** Knights of Columbus

This is to certify that the form referenced below has achieved a Flesch Reading Ease Score as indicated below and complies with the requirements of Ark. Stat. Ann. Section 66-3251 through 66-3258, cited as the Life and Disability Insurance Policy Language Simplification Act.

Form Number	Score
81L 1-13	56.5

  
Beth M. Elfrey  
Deputy General Counsel

November 30, 2012

Date

## KNIGHTS OF COLUMBUS LEVEL TERM INSURANCE RIDER

This rider is made part of the Contract to which it is attached. It is subject to the Contract's provisions. The definitions on Page 2 of the Contract also apply to this rider.

**RIDER INSURED:** The Rider Insured is the Insured unless a different person is named below:

**ISSUE DATE:** This rider becomes effective as of its Issue Date which is the Issue Date of the Contract unless a later date is shown below:

Issue Date:  Expiry Date:  Rider Amount:

### EXPIRY DATE

Unless the Expiry Date is shown above, the Expiry Date for this rider is the Annual Contract Date on the [tenth] anniversary of the Register Date shown on Page 3 of the Contract.

### PREMIUM

The extra premium for this rider is shown on Page 3 of the Contract. It is due at the same time and on the same terms as other premium under the Contract. The premium for this rider will cease at the Expiry Date. Premium for this rider will be waived if premium payments for the Contract are waived under a disability rider. Payment of the premium for this rider will not increase the cash value, if any, of the Contract.

### INSURANCE BENEFIT

We agree to pay the Rider Amount upon receipt at the Home Office of due proof of the Rider Insured's death prior to the Expiry Date while this rider and the Contract are in force. Payment of the Rider Amount will be in addition to the other benefits due under the Contract. This Rider Amount is that amount listed on Page 3 of the Contract unless the Rider Amount is shown above.

### CONVERSION

If it is in force, this rider can be converted to a new contract at any time before the Expiry Date and before the Annual Contract Date nearest the Rider Insured's 65<sup>th</sup> birthday or the first Annual Contract Date, if later. If a disability rider is attached to the Contract, conversion must occur before the Insured becomes wholly disabled. This rider can be converted without evidence of insurability for an amount not more than the Rider Amount. The new contract can be any of our plans (other than term) available for issue on the new contract's Register Date. The premium for the new contract will be based on the Rider Insured's birthday nearest the new contract's Register Date, and the new contract will be in the same premium class as this rider.

Conversion must be requested in writing. The conversion date, which is the Register Date of the new contract, will be a date mutually agreed upon.

A disability rider will apply to the new contract only if: (a) such a rider is attached to the Contract on the conversion date; and (b) we issue such riders at the Rider Insured's attained age at the conversion date. If the Rider Insured and the Insured are not the same, evidence of insurability will be required.

### DISABILITY CONVERSION BENEFIT

This rider will be converted automatically at the earlier of the Expiry Date and the Annual Contract Date nearest the Rider Insured's 65<sup>th</sup> birthday, provided that on the earliest of these dates a valid claim for waiver of premium benefits has been presented. Conversion will be to a Life Paid-Up at Age 100 contract. The Register Date of the new contract will be the earlier of the two dates mentioned above. The amount of the new contract will be the Rider Amount hereof. The new contract will be in the same premium class as this rider, and the premium rate will be that applicable to the Rider Insured's age on the birthday nearest the Register Date of the new contract. The new contract will include a disability rider, and disability benefits will commence immediately.

## SUICIDE EXCLUSION

If the Rider Insured dies within two years after the Issue Date of this rider due to suicide, this rider will terminate and we will pay the beneficiary the premium paid hereon.

## INCONTESTABILITY

We will not contest this rider after it has been in force during the Rider Insured's lifetime for two years from its Issue Date, except for nonpayment of premium.

## OPTIONS AVAILABLE UPON THE INSURED'S DEATH

If the Insured and the Rider Insured are not the same, and the Insured dies prior to the Expiry Date while this rider is in force, the Rider Insured shall be permitted to exercise the rights set forth in the Conversion provision, provided that conversion is requested within 60 days of the Insured's death. The Register Date of the new contract will be the first day of the month after the date of death.

## RESERVES

~~This rider's reserves are based on the Net Level Valuation Method, the 2001 Commissioners Standard Ordinary Mortality Table, 4% interest and continuous functions.~~

## TERMINATION

This rider terminates:

- (a) On its Expiry Date;
- (b) At the end of the Grace Period for a premium not paid for the Contract or this rider;
- (c) When a nonforfeiture option under the Contract takes effect;
- (d) When the Contract terminates for any reason; or
- (e) When we receive the owner's written request canceling this rider.

No premium for this rider will be due after the date of termination. Any advance premium payment not then due will be returned.

[Issued at New Haven, Connecticut].

KNIGHTS OF COLUMBUS

Attest:

By:



[ Donald Q Kehoe ]

Supreme Secretary

[ Carl A. Anderson ]

Supreme Knight



# KNIGHTS OF COLUMBUS

MAKING A DIFFERENCE FOR LIFE

November 9, 2012

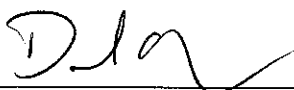
To: Department of Insurance

## Authorization

This letter, or a copy thereof, will authorize the consulting firm of First Consulting & Administration, Inc, Kansas City, Missouri, to represent the Knights of Columbus in matters before the Insurance Department.

This Authorization shall be valid until revoked by us.

Knights of Columbus

By: 

Title: Associate General Counsel

**KNIGHTS OF COLUMBUS**  
**Statement of Variable Material**

**Policy Form 81L 1-13**  
**November 9, 2012**

The following is an explanation of the variable material in Rider 81L 1-13

<b>Page No.</b>	<b>Variable Item</b>	<b>Explanation of Variable Material</b>
1	Rider Insured	This is John Doe information and will be completed if the rider insured is different from the insured sated in the policy.
1	Issue Date	This is John Doe information and will be completed if the issue date of this rider is different from the issue date of the contract.
1	Expiry Date	This is John Doe information. The rider will expire after either 10 years or 20 years.
1	Rider Amount	This is John Doe information.
1	Anniversary in Expiry Date provision	The anniversary will be either the tenth or twentieth anniversary of the Register Date.
2	Address and names of the Officers	The possibility that over time the Home Office could have a different address by relocating to a different city or state. The Officers names will change upon retirement or death.

**STATE OF ARKANSAS  
CERTIFICATION OF COMPLIANCE**

**Company Name:** Knights of Columbus  
**Form Title:** Level Term Insurance Rider  
**Form Number:** 81L 1-13

I hereby certify that to the best of my knowledge and belief, the above form(s) and submission complies with Reg. 19, as well as the other laws and regulations of the State of Arkansas.

  
Beth M. Elfrey  
Deputy General Counsel

November 30, 2012  
Date